



County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

425 Shatto Place, Los Angeles, California 90020
(213) 351-5602

PATRICIA S. PLOEHN, LCSW
Director

June 30, 2010

To: Supervisor Gloria Molina, Chair
Supervisor Mark Ridley-Thomas
Supervisor Zev Yaroslavsky
Supervisor Don Knabe
Supervisor Michael D. Antonovich

From: Patricia S. Ploehn, LCSW
Director

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**DUBNOFF CENTER GROUP HOME CONTRACT COMPLIANCE MONITORING
REVIEW**

In accordance with your Board's April 14, 2009 motion, we are informing your Board of the results of a group home compliance review.

Dubnoff Center Group Home is located in the 3rd Supervisorial District and provides services to Los Angeles County Department of Children and Family Services' (DCFS) foster youth. According to Dubnoff Center Group Home's program statement, the stated goal is "to serve court dependent children with behavior and emotionally disturbed problems". Dubnoff Center Group Home is licensed to serve a capacity of 12 children, ages 12 through 17.

The Out-of-Home Care Management Division (OHCMD) conducted a review of Dubnoff Center Group Home in August 2009 at which time they had two six-bed sites and four DCFS placed children. All four children were males. For purpose of this review, two currently placed children were interviewed, and their case files reviewed. The two remaining DCFS children were recently placed and there was limited applicable information available for review. Therefore, these two remaining children were not interviewed nor were their case file reviewed. The placed children's average overall length of placement was seven months, and the average age was 16. Seven staff files were reviewed for compliance with Title 22 regulations and contract requirements.

There were three children on psychotropic medication. We reviewed their case files to assess timeliness of psychotropic medication authorizations and to confirm the medication logs documented correct dosages were being administered as prescribed.

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SCOPE OF REVIEW

The purpose of this review was to assess Dubnoff Center Group Home's compliance with the Contract and State regulations. The visit included a review of Dubnoff Center Group Home's program statement, administrative internal policies and procedures, two placed children's case files and a random sampling of personal files. A visit was made to both facilities to assess the quality of care and supervision provided to the children, and we conducted interviews with the children to assess the care and services they are receiving.

A copy of this report has been sent to the Auditor-Controller (A-C) and Community Care Licensing (CCL).

SUMMARY

Generally, Dubnoff Center Group Home was providing good quality care to DCFS placed children, and the services were provided as outlined in their program statement. The children interviewed stated they were satisfied in the Group Home because the staff were concerned and were interested in their well-being.

The direct care staff stated that they were pleased with the support they receive from the administrative staff. The staff reported that the group home's administration was attentive to the needs of the children and they are open to listening to the staff's suggestions for improvement. The staff reported that they work together as a team and have staff meetings to share their concerns regarding the group home.

At the time of the review, the Group Home needed to develop comprehensive Needs and Services Plan (NSP). During the review, the Administrator stated that he would ensure that the NSPs would be comprehensive. In addition, we noted the children were not provided with life books/photo albums. The Administrator stated the children refuse to provide information for life books/photo albums, however, no documentation was found in the files to confirm children's refusal.

Dubnoff Center Group Home was receptive to implementing some systemic changes to improve their compliance with regulations and the Foster Care Agreement. Further, the Administrator stated that he welcomed the findings in the review so that their current operating systems can be improved.

NOTABLE FINDINGS

The following is the notable finding of our review:

- Of the five NSPs reviewed, none were comprehensive in that they did not complete all required elements in accordance with the NSP template. The A-C's prior review also noted that Dubnoff Center Group Home did not always ensure that Needs and Services Plans/Quarterly Reports were comprehensive.

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The detailed report of our findings is attached.

EXIT CONFERENCE

The following are highlights from the exit conference held October 10, 2009.

In attendance:

Ed Dixon, Residential Program Administrator, Dubnoff Center Group Home and Mary Espinoza, Monitor, Out-of-Home Care Management Division, DCFS.

Highlights:

The Residential Program Administrator was in agreement with our findings and recommendations. He stated that that he will ensure that the recommendations are enforced and that Dubnoff Center Group Home complies with DCFS. During the monitoring review, the Residential Program Administrator stated that the children refused to have life book photo/albums, however there was no documentation to support this claim located in the files. The Residential Administrator indicated that the children would be provided with life books/photo albums or there would be documentation regarding the children's refusal to have life book/photo albums.

As agreed, Dubnoff Center Group Home provided a timely written Corrective Action Plan (CAP) addressing each recommendation noted in this compliance report. The CAP is attached.

As noted in the monitoring protocol, a follow up visit will be conducted to address the provider's approved CAP and assess for full implementation of recommendations.

If you have any further questions, please call me or your staff may contact Armand Montiel, Board Relations Manager at (213) 351-5530.

PSP:LP:MG:

EAH:DC:me

Attachments

c: William T, Fujioka, Chief Executive Officer
Wendy Watanabe, Auditor-Controller
Donald H. Blevins, Chief Probation Officer
Public Information Office
Audit Committee
Sybil Brand Commission
Sandra Babcock, Dubnoff Center CEO, President
Lenora Copeland, Regional Manager, Community Care Licensing
Jean Chen, Regional Manager, Community Care Licensing

**DUBNOFF CENTER GROUP HOME PROGRAM
CONTRACT COMPLIANCE MONITORING REVIEW - SUMMARY**

**Dubnoff Center Group Home
Clybourn Site
10526 Dubnoff Way
North Hollywood, CA 91606
License Number 197605110
Rate Classification Level 12**

**Dubnoff Center Group Home
Valley Site
1610 N. Valley Street
Burbank, CA 91505
License Number 91290852
Rate Classification 12**

Contract Compliance Monitoring Review		Findings: August 2009
I	<u>Licensure/Contract Requirements</u> (9 Elements) <ol style="list-style-type: none"> 1. Timely Notification for Child's Relocation 2. Stabilization to Prevent Removal of Child 3. Transportation 4. SIRs 5. Compliance with Licensed Capacity 6. Disaster Drills Conducted 7. Disaster Drill Logs Maintenance 8. Runaway Procedures 9. Allowance Logs 	Full Compliance (All)
II	<u>Program Services</u> (7 Elements) <ol style="list-style-type: none"> 1. Child Population Consistent with Program Statement 2. DCFS CSW Authorization to Implement NSPs 3. Children's Participation in the Development of NSPs 4. NSPs Implemented and Discussed with Staff 5. Therapeutic Services Received 6. Recommended Assessments/Evaluations Implemented 7. DCFS CSWs Monthly Contacts Documented 	<ol style="list-style-type: none"> 1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Improvement Needed 7. Full Compliance
III	<u>Facility and Environment</u> (6 elements) <ol style="list-style-type: none"> 1. Exterior Well Maintained 2. Common Areas Maintained 3. Children's Bedrooms/Interior Maintained 4. Sufficient Recreational Equipment 5. Sufficient Educational Resources 6. Adequate Perishable and Non Perishable Food 	Full Compliance (All)
IV	<u>Educational and Emancipation Services</u> (4 Elements) <ol style="list-style-type: none"> 1. Emancipation/Vocational Programs Provided 2. ILP and Emancipation Planning 3. Current IEPs Maintained 	Full Compliance (All)

	4. Current Report Cards Maintained	
V	<u>Recreation and Activities</u> (3 Elements) <ol style="list-style-type: none"> 1. Participation in Recreational Activity Planning 2. Participation in Recreational Activities 3. Participation in Extra-Curricular, Enrichment, and Social Activities. 	Full Compliance (All)
VI	<u>Children's Health-Related Services (including Psychotropic Medications)</u> (9 Elements) <ol style="list-style-type: none"> 1. Current Court Authorization for Administration of Psychotropic Medication 2. Current Psychiatric Evaluation/Review 3. Medication Logs 4. Initial Medical Exams Conducted 5. Initial Medical Exams Timely 6. Follow-Up Medical Exams Timely 7. Initial Dental Exams 8. Initial Dental Exams Timely 9. Follow Up Dental Exams Timely 	Full Compliance (All)
VII	<u>Personal Rights</u> (11 Elements) <ol style="list-style-type: none"> 1. Children Informed of Home's Policies and Procedures 2. Children Feel Safe 3. Satisfaction with Meals and Snacks 4. Staff Treatment of Children with Respect and Dignity 5. Appropriate Rewards and Discipline System 6. Children Free to Receive or Reject Voluntary Medical, Dental, and Psychiatric Care 7. Children Allowed Private Visits, Calls, and Correspondence Children Free to Attend Religious Services/Activities 9. Reasonable Chores 10. Children Informed about Psychotropic Medication 11. Children Aware of Right to Refuse Psychotropic Medication 	Full Compliance (All)
VIII	<u>Children's Clothing and Allowance</u> (8 Elements) <ol style="list-style-type: none"> 1. \$50 Clothing Allowance 2. Adequate Quantity Clothing Inventory 3. Adequate Quality Clothing Inventory 4. Involvement in Selection of Clothing 5. Provision of Personal Care Items 6. Minimum Monetary Allowances 	<ol style="list-style-type: none"> 1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance

	7. Management of Allowance 8. Encouragement and Assistance with Life Book	7. Full Compliance 8. Improvement Needed
IX	<u>Personnel Records (including Staff Qualifications, Staffing Ratios, Criminal Clearances and Training)</u> (12 Elements) <ol style="list-style-type: none"> 1. Education /Experience Requirement 2. Criminal Fingerprint Cards Timely Submitted 3. CAls Timely Submitted 4. Signed Criminal Background Statement Timely 5. Employee Health Screening Timely 6. Valid Driver's Licenses 7. Signed Copies of GH Policies and Procedures 8. Initial Training Documentation 9. CPR Training Documentation 10. First Aid Training Documentation 11. On Going Training Documentation 12. Emergency Intervention Training Documentation 	Full Compliance (All)

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1610 N. Valley Street
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Rate Classification 12**

The following report is based on a "point in time" at the time of the monitoring visit. This compliance report addresses findings noted during the August 2009 monitoring review.

CONTRACTUAL COMPLIANCE

Based on our review of two children's case files and seven staff files, and/or documentation from the provider, Dubnoff Center Group Home was in full compliance with seven out of nine sections of our Contract Compliance review: Licensure/Contract Requirements; Facility and Environment; Educational and Emancipation Services; Recreation Activities; Children's Health-Related Services (Including Psychotropic Medication); Personal Rights; and Personnel Records (Including Staff Qualifications, Staffing Ratios, Criminal Clearances, and Training). The following report details the results of our review:

PROGRAM SERVICES

Based on our review of the children's case files, Dubnoff Center Group Home fully complied with six out of seven elements reviewed in the area of Program Services.

We noted that the sampled children met the Group Home's population criteria as outlined in their program statement and they were assessed for needed services within thirty days of placement.

Based on our review, we found that the treatment team developed and implemented the Needs and Services Plans (NSPs) with input from the child, and the NSPs' implementation was discussed with the group home staff. We also noted that the Group Home obtains the DCFS CSW's authorization to implement the NSPs. However, the NSPs were not comprehensive as they did not include the methods to reach the children's permanent plans and did not provide dental examination date for one child.

Lastly, we noted the children are receiving individual, family and group counseling, as well as the children's CSWs are contacted monthly by the Group Home staff.

The provider stated that he would ensure that the NSP/Quarterly Reports would be complete and comprehensive.

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Recommendation:

Dubnoff Center Group Home management shall ensure that:

1. NSPs are complete and comprehensive including all required elements.

CLOTHING AND ALLOWANCE REQUIREMENTS

Based on our review of two children's case files, Dubnoff Center's Group Home fully complied with seven out of eight elements in the areas of Clothing and Allowance.

During our review we noted the children received \$10.00 weekly and they spent their allowance on items of their choice or recreation. The children sign a document indicating receipt of their allowance and Dubnoff Center Group Home maintains allowance logs on file.

Based on our review, the two children interviewed reported that they received the required monthly clothing allowance and we noted documentation that clothing allowance was maintained. The children are provided with the opportunity to select their clothing and have sufficient clothing.

Dubnoff Center Group Home provides the children with their personal care items and the items are accessible to the children. The Group Home staff ensures that the children have sufficient personal care items.

During the time of the monitoring no life books/photo albums were found for the children. The Administrator stated the children refuse to provide information for life books/photo albums, however, no documentation was found in the files to confirm children's refusal.

Recommendation:

Dubnoff Center Group Home shall ensure that:

2. Dubnoff Center Group Home management encourage and assist children in creating and maintaining life books/photo albums or maintain documentation of the youths' refusal to create life book photo/albums.

PRIOR YEAR FOLLOW-UP FROM AUDITOR CONTROLLER'S REPORT

Objective

Determine the status of the recommendations reported in the A-C's prior monitoring review.

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Verification

We verified whether the outstanding recommendations from the A-C last report dated May 9, 2007 were implemented.

Results

The A-C's prior monitoring report contained two outstanding recommendations. Specifically, Dubnoff Center Group Home was to ensure that they develop comprehensive Needs and Service Plans which included measurable and attainable goals, and ensure the Group Home is maintained in good repair in accordance with Title 22 regulations. Based on our follow-up of these recommendations, Dubnoff Center Group Home fully implemented one of the recommendations as it relates to maintaining the group home in good repair. However, Dubnoff Center Group Home did not implement the recommendation regarding development of comprehensive Needs and Services Plans. Since we noted one recommendation was not fully implemented, corrective action was requested of Dubnoff Center Group Home to further address this finding.

Recommendation:

Dubnoff Center Group Home management shall ensure that:

3. They fully implement the one outstanding recommendation from the A-C' report dated May 9, 2007, which is noted in the report as Recommendation 1.



Dubnoff Center

for Child Development

DATE: November 6, 2009
TO: Dorothy Channel, CSA II
9320 Telstar Avenue, Suite 206
El Monte, CA 91713
FROM: Ed Dixon, Program Administrator, DUBNOFF CENTER Group Homes
RE: **Group Home Correction Action Plan for Compliance Report**

1. NEEDS AND SERVICE PLAN (NSP) WERE NOT COMPREHENSIVE

Finding(s):

- 1 Section of the Needs and Service Plans (NSP) were not completed and comprehensive.

Corrective Action Plan:

- 1 Ed Dixon, Program Administrator, will be assigned to review and ensure that updated Needs and Service Plans are comprehensive and the dates are accurate per **Group Home Contract Statement of Work Performance Measure 2.0 Division 6, Chapter 5, Section 84068-2((b-c) and 84068 .3(3). Group Home Contract Statement of Work, Performance 3.1**

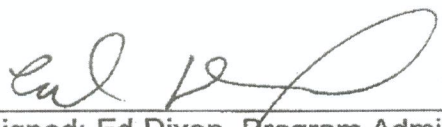
2. CLOTHING AND ALLOWANCE REQUIREMENTS


Finding(s):

- 1 Two children who were placed six months did not have a life book/photo album. The staff reported that the children refused to provide information and family photos. However, no documentation was found in the children's file indicating that the children refused to provide information for the life book/photo album, or did not want a life book/photo album. During the time of the monitoring no life books/photo albums were observed.

Corrective Action Plan:

- 1 Group Home supervisors will encourage and assist children in creating and maintaining life books/ Photo Album.


Signed: Ed Dixon, Program Administrator


Dated

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 Dubnoff Center
 10526 Dubnoff Way
 North Hollywood, CA 91606
 If To: ☐ Box ☐ State

Form 3800, August 2006 See Reverse for Instructions

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 1000 Wilshire Place -- Los Angeles, California 90020
 (213) 351-5602

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November 13, 2009

Sandra Stemig Babcock, Executive Director
 Dubnoff Center Group Home
 10526 Dubnoff Way
 North Hollywood, CA 91606

Dear Ms. Sandra Sternig-Babcock:

We have reviewed your Correction Action Plan (CAP) dated November 6, 2009. Your CAP is approved as written. The Out of Home Care Management Division Monitor will be following up with the Dubnoff Center Group Home to ensure maintenance of the approved CAP during visits.

Thank you for your cooperation. If you have any questions, please contact me at (626) 569-6819 or Mary Espinoza at (626) 569-6854.

Sincerely,

Dorothy Channel
 Dorothy Channel, CSA II
 Out of Home Care Management Division

DC;me

c: Community Care Licensing, Kimberly Evans LPA